



<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.	169.1469CIP1	
		First Named Inventor or Application Identifier		
		SEPPO REINO KERONEN		
		Express Mail Label No.		
<b>APPLICATION ELEMENTS</b>				
See MPEP chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> Commissioner for Patents Box Patent Application Washington, DC 20231		
1. <input type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program ( <i>Appendix</i> )		
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
3. <input checked="" type="checkbox"/> Specification <span style="float: right;">Total Pages <input type="text" value="38"/></span>		a. <input type="checkbox"/> Computer Readable Form (CRF)		
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <span style="float: right;">Total Sheets <input type="text" value="27"/></span>		b. Specification Sequence Listing on:		
5. <input type="checkbox"/> Oath or Declaration <span style="float: right;">Total Pages <input type="text"/></span>		i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or		
a. <input type="checkbox"/> Newly executed (original or copy)		ii. <input type="checkbox"/> paper		
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)		c. <input type="checkbox"/> Statements verifying identity of above copies		
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).				
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76				
<b>ACCOMPANYING APPLICATION PARTS</b>				
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))				
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)				
11. <input type="checkbox"/> English Translation Document (if applicable)				
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations				
13. <input type="checkbox"/> Preliminary Amendment				
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)				
16. <input type="checkbox"/> Other: _____				
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:				
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No. <u>09/414,558</u>				
Prior application information: Examiner <u>Not yet Assigned</u> Group/Art Unit: <u>2876</u>				
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.				
<b>18. CORRESPONDENCE ADDRESS</b>				
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		05514 (Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below
NAME _____				
Address _____				
City _____		State _____	Zip Code _____	
Country _____		Telephone _____	Fax _____	

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	14-20 =	0	X \$ 18.00 =	\$0
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	3-3 =	0	X \$ 80.00 =	\$0
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$270.00 =	\$0
				BASIC FEE (37 CFR 1.16(a))	\$710.00
	Total of above Calculations =				\$710.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				0
	TOTAL =				\$710.00

19. Small entity status

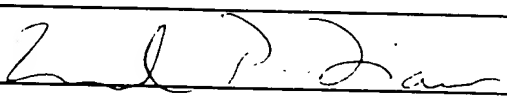
- a. ☐ A small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.

20. ☒ A check in the amount of \$ 710.00 to cover the filing fee is enclosed.

21. ☐ A check in the amount of \$ \_\_\_\_\_ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☒ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	LEONARD P. DIANA (Reg. No. 29,296)
SIGNATURE	
DATE	MARCH 8, 2001